USDA CSF Surveillance Submission Form for Diagnostic Laboratories

Instructions for Filling Out Form

1. Submitting Laboratory Information:

- a. **Lab ID:** Enter the OIDS number of the diagnostic laboratory that is sending the sample.
- b. **Establishment Name:** Enter the formal name of the diagnostic laboratory that is sending the sample.

2. <u>Testing Laboratory Information:</u>

- a. **Laboratory ID:** Enter the OIDS number for the NAHLN lab that will be receiving the sample for CSF testing.
- b. **Laboratory Name:** Enter the formal name of the NAHLN lab that will be receiving the sample for CSF testing.
- 3. <u>Page of :</u> Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4.** <u>CSF Referral Number:</u> Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submissions. The APHIS suggested format consists of 12 characters:
 - The first two characters indicate the State code, e.g. CO (Colorado) or IA (Iowa),
 - The next three characters are the collector's initials (First, Middle, Last) if the collector does not have a middle name, skip the middle character,
 - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005),
 - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

Examples:

COSAJ060104A: This submission is from Colorado, the submitter is Steven Allen Jones, the sample was collected on June 1, 2004, and it is the first submission of the day.

COSAJ060104B: This would be the CSF Referral Number for the second submission by that submitter for that day.

5. Sample information:

- a. **Sample bar code:** Place the bar code label here that corresponds to the label that is placed on the sample. A different bar code should be used for each sample, even for samples from the same animal.
- b. **Submitting laboratory accession number:** Enter the accession number used at your laboratory. The same accession number can be used for more than one sample if the samples are from the same animal.

- c. **Date collected:** Enter in the date the specimen sample(s) was collected in MM/DD/YY format.
- d. **Production site information:**
 - 1. **National Premise ID:** Enter the national premise ID number assigned by NASS for the production site where the animal(s) sampled is from.
 - 2. **State, Zip:** Enter the state and zip code of the production site.
- e. **Submitting Practitioner Information:** Enter in the full name (last, first) and location of the submitting practitioner.
- f. **Reason for submission:** Circle only one of the reasons of why the sample is being submitted (key also located on the form):
 - 1. Submission with Septicemia
 - 2. Submission with CNS signs
 - 3. Submission with Abortions
 - 4. General swine submission
- g. **Specimen type:** Circle only one of the types of specimens that are being submitted for testing:
 - 1. Nasal Swab
 - 2. Tonsil scraping
 - 3. Tonsil
 - 4. Other specimen, please specify
- **6.** Repeat Steps 1-5 for each sample being submitted.

If multiple specimens from the same animal are being submitted:

- each specimen should receive its own bar code,
- the box to indicate the specimen is from the same animal that the previous specimen was collected should be checked, and
- production site information and submitting practitioner information do not need to be re-entered on the form after the initial entry for that animal.
- 7. <u>Date of Samples Shipped to Testing Lab:</u> Enter the date this form and the sample(s) are shipped to the NAHLN testing laboratory in <u>MM/DD/YY</u> format.
- **8.** Number of Samples Shipped: Enter the total number of samples in this shipment.
- **9.** <u>Signature of Submitter:</u> The person filling out the form and shipping the sample(s) should sign the form.

CSF Submission Form for Diagnostic Laboratories

Sub	mitting Laboratory Info	rmation	Testing Labora	atory Infor	mation	CSF Referral Number:
ahi	oratory ID: <u>2.16.840.1.1</u>	13883 3 5 1 🛗	Laboratory ID: 3	2 16 840 1	113883.3.5.1.	
Esta	ablishment Name:		Laboratory Nan	ne:		
		Submitting Laboratory	Productio	n Site Info	rmation	Reason for Submission (Circle one only)
		Accession	National			Septicemia 2. CNS signs
	Sample Bar Code	Number	Premises ID	State	Zip	3. Abortions 4. General swine submission
1		Date	Submitting Practi	tioner Info	rmation	Specimen Type
'		Collected	Name :			(Circle one only)
		(mm/dd/yy)	Last	First	State:	 Nasal swab Tonsil scraping Tonsil 4. Other,
			Phone :		Zip:	specify:
	Check here if specimen is from same animal as	Submitting	Productio	n Site Info	rmation	Reason for Submission (Circle one only)
	previous sample.	Laboratory Accession		1		1. Septicemia 2. CNS signs
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		(IIIII/dd/yy)	Phone :		State: Zip:	3. Tonsil 4. Other,
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	nature of Submitte	r:				

Designated Laboratory, Shipping Address and Contact Information for VDLs

Location where	Designated	Laboratory
Sampled	Laboratory	Contact
Arizona VDL	Arizona Veterinary Diagnostic	Dr. Greg Bradley
	Laboratory	Phone: 520-621-2356 x16
	2831 N. Freeway	Fax: 520-626-8696
	Tucson AZ 85705	Email: gabrad@ag.arizona.edu
California VDL	California Animal Health & Food	Dr. Sharon Hietala, Dr. Beate
	Safety Laboratory	Crossley
	University of California	Phone: 530-752-4739, 530-752-5662
	School of Veterinary Medicine	Fax: 530-752-5680
	W. Health Science Drive	Email: skhietala@ucdavis.edu,
	Davis CA 95616	bcrossle@ucdavis.edu
Florida VDL	Kissimmee Diagnostic Laboratory	Dr. Betty Miguel
New Jersey VDL	Florida Department of Agriculture	Phone: 321-697-1400
	2700 N. John Young Parkway	Direct line: 321-697-1405
	Kissimmee FL 34745	Cell: 407-948-5451
		Fax: 321-697-1467
		Email: miguelb@doacs.state.fl.us
Georgia VDL	Athens Veterinary Diagnostic	Dr. Doris Miller
Minnesota VDL	Laboratory	Phone: 706-542-5568
	The University of Georgia	Fax: 706-542-5977
	College of Veterinary Medicine	Email: miller@vet.uga.edu
	Building 1079	
	Athens GA 30602	
Illinois VDL	Wisconsin Veterinary Diagnostic	Audrey Dikkeboom
	Laboratory	Phone: 608-262-5432
	Wisconsin Department of	Fax: 608-262-5005
	Agriculture	Email:
	6101 Mineral Point Road	audrey.dikkeboom@wvdl.wisc.edu,
	Madison WI 53706	kathy.kurth@wvdl.wisc.edu
Indiana VDL	Animal Health Diagnostic	Dr. Alfonso Torres,
New York VDL	Cornell University	Dr. Edward Dubovi
	College of Veterinary Medicine	Phone: 607-253-4136
	S3 110 Schurman Hall	Fax: 607-253-3440
	Upper Tower Rd.	Email: at97@cornell.edu,
	Ithaca NY 14853	ejd5@cornell.edu

Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF) Testing

Location where	Designated	Laboratory
Sampled	Laboratory	Contact
Iowa VDL	Iowa State University	Dr. Bruce Janke
	Veterinary Diagnostic Laboratory	Phone: 515-294-1950
	1600 S. 16th St.	Fax: 515-294-3564
	Ames IA 50011	Email: bhjanke@iastate.edu
Kansas VDL	North Carolina Department of	Dr. Gene Erickson
North Carolina	Agriculture	Phone: 919-733-3986
VDL	Rollins Animal Disease Diagnostic	Fax: 919-733-0454
	Laboratory	Email: gene.erickson@ncmail.net
	2101 Blue Ridge Rd.	
	Raleigh NC 27607	
Nebraska VDL	Washington Animal Disease	Diana Gregg, Sara Schlee, or
Washington VDL	Diagnostic Laboratory	Tammy Coleman
	Bustad Hall	Phone: 509-335-9696
	Room 155-N	Fax: 509-335-7424
	Pullman WA 99164	Email: waddl@vetmed.wsu.edu
New Mexico	Texas Vet Medical Diagnostic	Dr. Lelve Gayle, Dr.Gayne
VDL	Laboratory	Fearneyhouge, Dr. Loyd Sneed
Oklahoma VDL	1 Sippel Road	Phone: 976-845-9000
Texas VDL	Drawer 3040	Fax: 976-845-1794
	College Station TX 77841	Email: <u>l-gayle@tvmdl.tamu.edu</u>

CSF Surveillance Submission Form for Slaughter Establishments

Instructions for Filling Out Form

1. Establishment Information:

- a. **Plant ID:** Enter the Plant ID number as designated in the ADRS database.
- b. **Establishment Name:** Enter the formal name of the slaughter establishment.

2. <u>Testing Laboratory Information:</u>

- a. **Laboratory ID:** Enter the OIDS number for the NAHLN lab that will be receiving the sample for CSF testing.
- b. **Laboratory Name:** Enter the formal name of the NAHLN lab that will be receiving the sample for CSF testing.
- 3. <u>Page of :</u> Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4.** <u>CSF Referral Number:</u> Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submission. The FSIS format is the following:
 - The first set of characters (up to five) are the FSIS Establishment Number (Do not include preceding zeroes or following letters, e.g. 00245M is just "245")
 - The next three characters are the collector's initials (First, Middle, Last) if the collector does not have a middle name, skip the middle character,
 - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005),
 - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

Example:

477CSH080404A: This submission is from FSIS Establishment 00477 and was collected by Charles Scott Henry on August 4, 2004. This is the first submission of the day.

5. Sample Information:

- a. **Sample Bar Code:** Place the bar code label here that corresponds to the label that is placed on the sample tube.
- b. Lot ID: Enter in the Lot ID number as established by the slaughter facility.
- c. **Retained or Condemnation Tag ID:** Enter the retained or condemnation ID number for the animal sampled.
- d. **Production Site Information:**
 - 1. **National Premise ID:** Enter the national premise ID number assigned by NASS for the production site where the animal(s) sampled is from.
 - 2. **State, Zip:** Enter the state and zip code of the production site.

- e. **Reason for Submission:** Circle the reason why the sample is being submitted:
 - 1. ₁Erysi: Submission with Erysipelas
 - 2. ₂Septi: Submission with Septicemia
 - 3. 3Other: Other Condemnation
 - 4. 4Random: Randomly selected
- f. **Specimen Type:** Circle only one of the types of specimens that are being submitted for testing:
 - 1. ₁T: Tonsil
 - 2. 2O: Other specimen, please specify
- g. **Date Collected:** Enter in the date the specimen sample(s) was collected in MM/DD/YY format.
- **6.** <u>Date Samples Shipped to Testing Lab:</u> Enter the date this form and sample(s) are shipped to the NAHLN testing laboratory in <u>MM/DD/YY</u> format.
- 7. Number of Samples Shipped: Enter the total number of samples in this shipment.
- **8.** <u>Signature of Submitter:</u> The person filling out the form and shipping the sample(s) should sign the form.

CSF Submission Forms for Slaughter Establishments

SF	ablishment Informat	ion	Tes	sting Laborator	y Informa	ation		Page	of	
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Participating Slaughter Establishments

State	Plant ID	Establishment Name	City	NAHLN Lab
CA	00360 M	Clougherty Packing Co.	Vernon	CA
FL	18911 M	Mary's Ranch C/O Cabrera's Sla	Miami	FL
GA	02600 M	Lowell Packing Co., Inc.	Fitzgerald	GA
НІ	06208 M	Farmers Livestock Coop.	Ewa Beach	CA
IA	00003S M	Swift Pork Company	Marshalltown	AZ
	00085O M	Excel Corporation	Ottumwa	FL
	00244 M	Tyson Foods, Inc.	Storm Lake	CA
	00244L M	Tyson Foods, Inc.	Columbus Jct.	AZ
	00244P M	Tyson Foods Inc.	Perry	CO
	00244W M	Tyson Foods, Inc.	Waterloo	LA
	00717 M	Farmland Foods Inc	Denison	CA
	01775 M	The Iowa Packing Co.	Des Moines	CA
	05804 M	John Morrell & Co.	Sioux City	CO
IL	00085B M	Excel Corporation	Beardstown	WI
	00717M M	Farmland Foods, Inc.	Monmouth	WI
IN	00244I M	Tyson Foods, Inc.	Logansport	NY
	17564 M	Indiana Packers Corporation	Delphi	NY
KS	00520 M	RC Pork, Inc.	Downs	NC
MN	00003W M	Swift Pork Company	Worthington	FL
	01620 M	Quality Pork Processors, Inc.	Austin	FL
NC	00413 M	Premium Standard Farms, Inc.	Clinton	NC
	18079 M	Smithfield Packing Co. Inc.	Tar Heel	NC
NE	00199N M	Hormel Foods Corp.	Fremont	IA
	00244M M	Tyson Foods, Inc.	Madison	IA
	00717CRM	Farmland Foods, Inc.	Crete	IA
NJ	00850 M	Marathon Enterprises Inc.	Jersey City	FL
NY	04018 M	Hilltown Pork, Inc.	Canaan	NY

Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF) Testing

State	Plant ID	Establishment Name	City	NAHLN Lab
OK	13597 M	Seaboard Farms, Inc.	Guymon	TX
TX	00403 M	Owens Country Sausage, Inc.	Richardson	TX
	13189 M	Union Slaughter House, Inc.	Del Rio	TX
	21179 M	J & J Packing Co., Inc.	Brookshire	TX
WA	01628 M	Kapowsin Meat, Packers	Graham	WA

Designated Laboratory, Shipping Address and Contact Information for Slaughter Establishments

States, other than Iowa:

Location where Sampled	Designated Laboratory	Laboratory Contact
Hawaii slaughter plants	California Animal Health & Food Safety Laboratory	Dr. Sharon Hietala or Dr. Beate Crossley
	University of California School of Veterinary Medicine	Phone: 530-752-4739,
	W. Health Science Drive	530-752-5662 Fax: 530-752-5680
	Davis CA 95616	Email: skhietala@ucdavis.edu,
		bcrossle@ucdavis.edu
Florida slaughter plants	Kissimmee Diagnostic Laboratory	Dr. Betty Miguel
New Jersey slaughter	Florida Department of Agriculture	Phone: 321-697-1400
plants	2700 N. John Young Parkway	Direct line: 321-697-1405
Minnesota slaughter plants	Kissimmee FL 34745	Cell: 407-948-5451
		Fax: 321-697-1467
	Adama Watarinama Diagnastia	Email: miguelb@doacs.state.fl.us
Georgia slaughter plants	Athens Veterinary Diagnostic Laboratory	Dr. Doris Miller Phone: 706-542-5568
	The University of Georgia	Fax: 706-542-5977
	College of Veterinary Medicine	Email: miller@vet.uga.edu
	Building 1079	Linair. miner e vet.aga.eda
	Athens GA 30602	
Illinois slaughter plants	Wisconsin Veterinary Diagnostic Laboratory	Audrey Dikkeboom
	Wisconsin Department of	Phone: 608-262-5432 Fax: 608-262-5005
	Agriculture	Email:
	6101 Mineral Point Road	audrey.dikkeboom@wvdl.wisc.edu,
	Madison WI 53706	kathy.kurth@wvdl.wisc.edu
Indiana slaughter plants	Animal Health Diagnostic Center	Dr. Alfonso Torres,
New York slaughter plants	Cornell University, College of	Dr. Edward Dubovi
	Veterinary Medicine	Phone: 607-253-4136
	S3 110 Schurman Hall	Fax: 607-253-3440
	Upper Tower Rd. Ithaca NY 14853	Email: at97@cornell.edu,
		ejd5@cornell.edu
Kansas slaughter plants	North Carolina Department of	Dr. Gene Erickson
North Carolina slaughter	Agriculture Rollins Animal Disease Diagnostic	Phone: 919-733-3986 Fax: 919-733-0454
plants	Laboratory	Email: gene.erickson@ncmail.net
	2101 Blue Ridge Rd.	
	Raleigh NC 27607	

Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF) Testing

Location where	Designated	Laboratory
Sampled	Laboratory	Contact
Nebraska slaughter plants	Iowa State University	Dr. Bruce Janke
	Veterinary Diagnostic Laboratory	Phone: 515-294-1950
	1600 S. 16th St.	Fax: 515-294-3564
	Ames IA 50011	Email: bhjanke@iastate.edu
Oklahoma slaughter plants	Texas Vet Medical Diagnostic	Dr. Lelve Gayle, Dr.Gayne
Texas Slaughter plants	Laboratory	Fearneyhouge, Dr. Loyd Sneed
	1 Sippel Road	Phone: 976-845-9000
	Drawer 3040	Fax: 976-845-1794
	College Station TX 77841	Email: <u>l-gayle@tvmdl.tamu.edu</u>
Washington slaughter plants	Washington Animal Disease	Diana Gregg, Sara Schlee, or
	Diagnostic Laboratory	Tammy Coleman
	Bustad Hall	Phone: 509-335-9696
	Room 155-N	Fax: 509-335-7424
	Pullman WA 99164	Email: waddl@vetmed.wsu.edu

Iowa slaughter plants:

Location where	Designated	Laboratory
Sampled	Laboratory	Contact
00003SM	Arizona Veterinary Diagnostic	Dr. Greg Bradley
00244LM	Laboratory	Phone: 520-621-2356 x16
	2831 N. Freeway	Fax: 520-626-8696
	Tucson AZ 85705	Email: gabrad@ag.arizona.edu
00244M	California Animal Health & Food	Dr. Sharon Hietala or
00717M	Safety Laboratory	Dr. Beate Crossley
01775M	University of California	Phone: 530-752-4739,
	School of Veterinary Medicine	530-752-5662
	W. Health Science Drive	Fax: 530-752-5680
	Davis CA 95616	Email: skhietala@ucdavis.edu,
		bcrossle@ucdavis.edu
00244PM	Colorado State University	Dr. Barbara Powers
05804M	Veterinary Diagnostic Laboratory	Phone: 970-297-1281
	College of Veterinary Medicine	Fax: 970-297-0320
	& Biomedical Sciences	Email: <u>barb.powers@colostate.edu</u>
	300 West Drake	
	Fort Collins CO 80523	
00244WM	Louisiana State University	Alma Roy
	Veterinary Medical Diagnostic	Phone: 225-578-9777
	Laboratory	Fax: 225-578-9784
	1909 Skip Bertman Drive	Email: aroy@vetmed.lsu.edu
	Baton Rouge LA 70803	
00850M	Kissimmee Diagnostic	Dr. Betty Miguel
	Laboratory	Phone: 321-697-1400
	Florida Department of	Direct line: 321-697-1405
	Agriculture	Cell: 407-948-5451
	2700 N. John Young Parkway	Fax: 321-697-1467
	Kissimmee FL 34745	Email: miguelb@doacs.state.fl.us

USDA CSF Surveillance Submission Form for Wildlife Services

Instructions for Filling Out Form

1. Wildlife Services Information: Enter the full name (last, first), address, city, state, and zip code of the biologist collecting and submitting the samples.

2. Testing Laboratory Information:

- a. **Laboratory ID:** Enter the OIDS number for the NAHLN lab that will be receiving the sample for CSF testing.
- b. **Laboratory Name:** Enter the formal name of the NAHLN lab that will be receiving the sample for CSF testing.
- 3. <u>Page of :</u> Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4.** <u>CSF Referral Number:</u> Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submissions. The APHIS suggested format consists of 12 characters:
 - The first two characters indicate the State code, e.g. CO (Colorado) or IA (Iowa),
 - The next three characters are the collector's initials (First, Middle, Last) if the collector does not have a middle name, skip the middle character,
 - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005),
 - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

Examples:

COSAJ060104A: This submission is from Colorado, the submitter is Steven Allen Jones, the sample was collected on June 1, 004, and it is the first submission of the day. COSAJ060104B: This would be the CSF Referral Number for the second submission by that submitter for that day.

5. Sample information:

- a. **Sample bar code:** Place the bar code label here that corresponds to the label that is placed on the sample.
- b. **Collection site:** Enter the county and state where the sample(s) was collected.
- c. **Collection location:** Circle the location(s) that applies to the area where the animal was found:
 - 1. Urban
 - 2. Rural
 - 3. Captive

and enter the proximity (in miles) to:

- 4. Swine farm
- 5. Airport
- 6. Landfill

- d. **Collection habitat:** Circle the habitat(s) that applies to the area where the animal was found:
 - 1. Open field
 - 2. Forested
 - 3. Wetland
 - 4. Other, please specify
- e. **Feral pig type:** Circle the appropriate type of feral pig from which the sample(s) was collected:
 - 1. Free-roaming domestic pig
 - 2. Eurasian wild pig
 - 3. Wild type cross
 - 4. Javelina
- f. **Age Class:** Circle the appropriate age group of the pig from which the sample(s) was collected:
 - 1. Juvenile (suckling pig)
 - 2. Sub-adult (any other pig not classified as a juvenile or adult)
 - 3. Adult (sow or boar of breeding age)
- g. **Sex:** Circle the gender of the animal from which the sample(s) was collected:
 - 1. Male
 - 2. Female
- h. **GPS location:** Enter in the GPS location from where the specimen sample(s) were collected.
- i. **Date collected:** Enter in the date the specimen sample(s) was collected in MM/DD/YY format.
- j. **Specimen type:** Circle only one of the types of specimens that are being submitted for testing:
 - 1. Tonsil
 - 2. Tonsil scraping
 - 3. Blood
 - 4. Other specimen, please specify (e.g. serum*)
- **6.** <u>Date of Samples Shipped to Testing Lab:</u> Enter the date this form and the sample(s) are shipped to the NAHLN testing laboratory in <u>MM/DD/YY</u> format.
- 7. <u>Number of Samples Shipped:</u> Enter the total number of samples in this shipment.
- **8.** <u>Signature of Submitter:</u> The person filling out the form and shipping the sample(s) should sign the form.
- * Serum samples are not currently tested for CSF at NAHLN labs. Please submit any serum samples collected to FADDL.

CSF Submission form for Wildlife Services

Wildlife Services Information				Testing Laboratory Informati	on CS	CSF Referral Number:	
		ə:	1	Laboratory ID: <u>2.16.840.1.1138</u>		wio.iui ituilipel.	
		Last	firet				
				Laboratory Name:			
City	·	State	e:Zip:				
	Sample I	Bar Code	Collection Site		Collection Habita (Circle all that apply)		
				1. Urban 2. Rurai	1. Open field	Free-roaming domestic pig	
				3. Captive Proximity to:	2. Forested	2. Eurasian wild pig	
1				4. Swine farm: miles	3. Wetland	3. Wild type cross	
				5. Airport: miles	4. Other, specify:	4. Javelina	
Δασ	Class:	Sex:	GPS location:	6. Landfill:miles	-	<u> </u>	
_	venille	1. Male	Gro location;	N W:	Date Collected:	// /	
	ub-adult	2. Female	Specimen Type (Circle one only)	Tonsil 2. Tonsil scraping	3. Blood 4	. Other, specify:	
J. AC	iuit						
	Sample l	Bar Code	Collection Site County State		Collection Habita (Circle all that apply)		
				1. Urban 2. Rural	1. Open field	Free-roaming domestic pig	
_				3. Captive Proximity to:	2. Forested	2. Eurasian wild pig	
2				4. Swine farm: miles	3. Wetland	3. Wild type cross	
				5. Airport:miles 6. Landfill:miles	4. Other, specify:	4. Javelina	
Age	Class:	Sex:	GPS location:	N	Date Collected:	1 1	
1. Ju	venille	1. Male		w		mm /dd / yy	
2. SL	ıb-adult	2. Female	Specimen Type	Tonsil 2. Tonsil scraping	3. Blood 4	. Other, specify:	
3. Ac	<u>fuit</u>		(Circle one only)				
	0 1		Collection Site	Collection Location	Collection Habita	t Feral Pig Type	
	Sample I	Bar Code	County State		(Circle all that apply)	(Circle one only)	
				1. Urban 2. Rural	1. Open field	Free-roaming domestic pig	
2				3. Captive Proximity to:	2. Forested	2. Eurasian wild pig	
3				4. Swine farm: miles	3. Wetland	3. Wild type cross	
				5. Airport: miles	4. Other, specify:	4. Javelina	
Age	Class:	Sex:	GPS location:	6. Landfill: miles N .	D-4- Q !!		
	venille	1. Male		w	Date Collected:	// /dd / yy	
1. JU	ıb-adult	2. Female	Specimen Type	Tonsil 2. Tonsil scraping	2 Di 1 :		
		1	(Circle one only)	Tonsil 2. Tonsil scraping	3. Blood 4.	Other, specify:	

Designated Laboratory, Shipping Address and Contact Information for Wildlife Services

State where	Designated	Laboratory
sampled	Laboratory	Contact
California	California Animal Health & Food	Dr. Sharon Hietala or
	Safety Laboratory	Dr. Beate Crossley
	University of California	Phone: 530-752-4739,
	School of Veterinary Medicine	530-752-5662
	W. Health Science Drive	Fax: 530-752-5680
	Davis CA 95616	Email: skhietala@ucdavis.edu,
		bcrossle@ucdavis.edu
Florida	Kissimmee Diagnostic Laboratory	Dr. Betty Miguel
	Florida Department of Agriculture	Phone: 321-697-1400
	2700 N. John Young Parkway	Direct line: 321-697-1405
	Kissimmee FL 34745	Cell: 407-948-5451
		Fax: 321-697-1467
		Email: miguelb@doacs.state.fl.us
Georgia	Louisiana State University	Alma Roy
South Carolina	Veterinary Medical Diagnostic	Phone: 225-578-9777
Puerto Rico	Laboratory	Fax: 225-578-9784
	1909 Skip Bertman Drive	Email: aroy@vetmed.lsu.edu
	Baton Rouge LA 70803	
Hawaii	Arizona Veterinary Diagnostic	Dr. Greg Bradley
New Mexico	Laboratory	Phone: 520-621-2356 x16
Oklahoma	2831 N. Freeway	Fax: 520-626-8696
	Tucson AZ 85705	Email: gabrad@ag.arizona.edu
Missouri	Colorado State University Veterinary	Dr. Barbara Powers
Oregon	Diagnostic Laboratory	Phone: 970-297-1281
	College of Veterinary Medicine &	Fax: 970-297-0320
	Biomedical Sciences	Email: <u>barb.powers@colostate.edu</u>
	300 West Drake	_
	Fort Collins CO 80523	
North Carolina	North Carolina Department of	Dr. Gene Erickson
	Agriculture	Phone: 919-733-3986
	Rollins Animal Disease Diagnostic	Fax: 919-733-0454
	Laboratory	Email: gene.erickson@ncmail.net
	2101 Blue Ridge Rd.	
	Raleigh NC 27607	
Texas	Texas Veterinary Medical Diagnostic	Dr. Lelve Gayle, Dr.Gayne
	Laboratory	Fearneyhouge, Dr. Loyd Sneed
	1 Sippel Road	Phone: 976-845-9000
	Drawer 3040	Fax: 976-845-1794
	College Station TX 77841	Email: <u>l-gayle@tvmdl.tamu.edu</u>